Reviewer’s report

Title: Physician-reported barriers to using evidence-based recommendations for low back pain in clinical practice: a systematic review and synthesis of qualitative studies using the Theoretical Domains Framework

Version: 0 Date: 07 Dec 2018

Reviewer: Donald Rindal

Reviewer’s report:

Abstract Comments:

In the background section please "this" rather than "our" as we know who the authors are. The same goes for the last sentence of the background.

In the methods section you need to describe the total time period you searched.

In the background you talk about facilitators but don't report on them in the results. The title suggests you are just focusing on barriers but in other places facilitators are briefly discussed. You need to be consistent throughout. The field would benefit from the broader report of both barriers and facilitators but your report seems to focus on barriers with a sprinkling of content related to facilitators. Please be consistent. Addressing this issue is why I concluded it needs major, not minor, revisions.

BACKGROUND Comments:

Well written and frames things up nicely.

METHODS Comments:

This section is clear so the reader understands how this review was conducted. You provide sufficient detail.

RESULTS Comments:

Page 14, line 6-8, you state "We are not highly confident.........". This statement as written seems to belong in the discussion. If you keep it here, it needs to be stated differently. How about "the level of confidence was determined to be..... Also, please provide more detailed explanation of the results presented in Table 2 and the CERQual approach. The reader wants to understand what is presented in the tables but as written you make the reader work harder than they should. You
need to help the reader who is not familiar with the CERQual approach. This comment applies to all 5 behaviors and the related tables.

DISCUSSION Comments:

Page 17, line 12, you state that interventions often target a single domain. If you can't support that statement with references, you need to reword it. Another option is to speak about the limitations of only addressing one domain and not focus on this weakness in prior studies.

Page 17, section entitled Theoretically-informed solutions, could benefit from a discussion about other frameworks since several exist. When you go down the path of discussing the strengths of TDF, you better justify your rationale. You start to address my comment in the section entitled: Previous Implementation Approaches. One suggestion from a flow perspective would be to move this section so it follows the section entitled Previous Implementation Approaches.

Page 19, line 22 appears to have a word missing.

Page 19, line 24: It it a diagnosis or rather an assessment? When you talk about provider behavior, use consistent terminology.

Page 21, line 5, the word "enabler". You use the word "facilitators" in the abstract, etc. I suggest using it here to be consistent.

Page 21, line 12, you talk about international campaigns. These campaigns need references.

Figure 2, assessment of methodological rigour. The bottom line on Figure 2 needs additional clarification as to the overall score. Each study is assessed with a check or a X or a !. The table would benefit by a brief definition of each as well as the explanation of the good, moderate and low overall score.

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Please indicate the quality of language in the manuscript:

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